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FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Kamala D. Harris		
(b) Address (number and street) <input type="checkbox"/> Check if address changed 777 S. Figueroa Street, Suite 4050		2. Identification Number C00571919
(c) City, State, and ZIP Code Los Angeles, CA 90017		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
4. Party Affiliation Democratic Party	5. Office Sought Senate	6. State & District of Candidate CA, 00

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Kamala Harris for Senate
(b) Address (number and street) 777 S. Figueroa Street, Suite 4050
(c) City, State, and ZIP Code Los Angeles, CA 90017


DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Golden-Bay State Victory Fund
(b) Address (number and street) 124 Washington Street, Suite 101
(c) City, State, and ZIP Code Foxboro, MA 02035

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.	
Signature of Candidate 	Date 9/2/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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FEC FORM 2 (REV. 12/2006)

201509140200239950

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Off the Sidelines Senate 2016

(b) Address (number and street)

916 Pennsylvania Ave SE

(c) City, State and ZIP Code

Washington

DC

20003

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Kamala Harris Victory Fund

(b) Address (number and street)

777 S. Figueroa Street, Suite 4050

(c) City, State and ZIP Code

Los Angeles

CA

90018

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

201509140200239951

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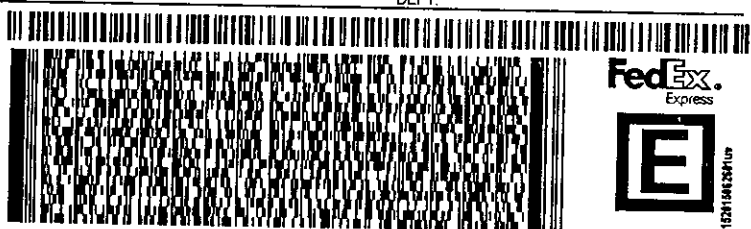
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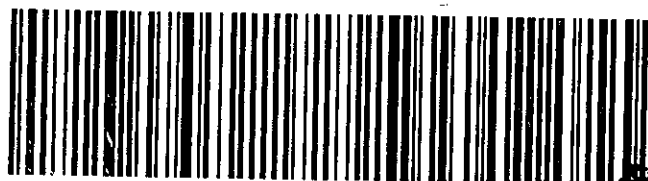
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United States Senate

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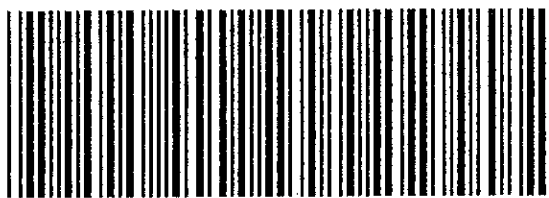
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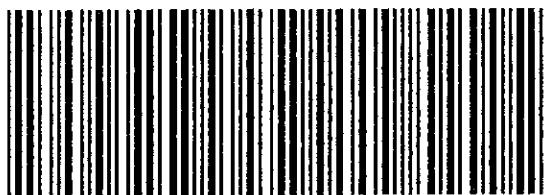
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2/28/2015

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